C. C. 106

City of Cambridge

In City Council December 19, 1988

The Committee on Health and Hospitals conducted a public meeting on December 14, 1988 at 8:00 A.M.

The purpose of the meeting was to review the bugetary needs and priorities ofthe Hospital for Fiscal Year 89-90 as well as to receive a status report on the school health program.

Councillor Duehay, Chairman of the Committee, opened the meeting by thanking the members of the medical staff and administration of the hospital for their generous support to the Armenian Relief Fund. Furthermore, he stated that the reason for this meeting was to appraise the members of the City Council of the needs of the hospital for the upcoming budgetary cycle.

At this time Hospital Administrator, John O'Brien, informed the committee that a staff shortfall in the amount of $1.5 million currently exists due to the nursing shortage at the hospital, a phenomenon which exists throughout the state. He further stated that the management of the hospital has attempted to be flexible to the desires of the nursing staff for flexible working hours and additional benefits where the union permits, however, even taking all of these amenities into consideration private agency services is much more lucrative for nurses. Furthermore, he stated that the hospital deficit as of June 30, 1988 was currently $5 million versus $8.9 million as of June 30, 1987.

Mr. O'Brien stated that admissions have increased but that patient days have decreased and that it is expected that during Fiscal Year 1989 130,000 out patients will take place. He also informed the committee that the births occurring at the hospital had doubled since 1986. He further stated that recruitment and retention is a very important function at the hospital and he has appointed a group of experienced staff members to meet on a regular basis with all medical personnel placing emphasis on the nursing staff in an effort to address any dissatisfaction.

Vice-Mayor Wolf questioned whether or not a creative hiring and incentive plan could be developed in an effort to retain and hire full time nurses.

Mr. O'Brien stated that everything possible had been done in this area but they cannot compet with agency nurses. He further stated to question by Councillor Duehay, that the strategic plan of the hospital is in full implementation in regard to geriatric, medical, surgical and pediatric divisions, unfortunately because of bugetary shortfalls programs currently in operation in the hospital which do not financially support themselves must be reviewed in the upcoming budgetary cycle.

At this time Dr. Chalfen, Commissioner of Health and Hospital, provided the committee with an update of the school health services provided through the hospital, including a written memorandum a copy of which is attached, outlined the staff of the school mandated services and statistical analysis of school health services provided. He further informed the committee that the programs currently provided have a nurse in each school daily on a part-

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time basis.

At this time Councillor Duehay requested the City Clerk to notify the Superintendent of School that the committee urged the Superintendent to replace the hearing and vision coordinator as soon as possible.

The members of the committee expressed their deepest congratulations to Mr. O'Brien, Dr. Chalfen, his staff and the medical personnel for their diligence and sincerity in maintaining superior health care delivery with reduced staff and financial resources.

The meeting adjourned at 9:19 A.M.

For the Committee,

Councillor Francis H. Duehay
Chairman.

December 13, 1988

To: Melvin Chalfen, M.D.

From: Bridget Hanson, M.D.

Re: **Update On School Health Services**

This is to update you on the status of school health services this mid-way through this school year. I have included some statistical material, as well as a narrative summary.

Staffing

This year we have the staffing and pattern that had been recommended by the school health task force. We have four school nurse practitioners, one of whom is the nurse coordinator, and two school nurses. We also have three health aides in the schools. This has meant that each nurse has two schools, except that one larger school, the Harrington, has one single nurse.

As a result of this increased staffing, the nurses are farther along in the performance of their mandated services than they have been at this same place in past years; they also work in three hour blocks of time instead of two hours which enables them to use their time more efficiently.

For the first time this year they have been able to participate in a fully integrated way in the kindergarten screening. (I'm enclosing a letter from Bonnie Bisbicos which corroborates the value of such participation.) They will be also able to participate in the kindergarten registration sessions later this year, they have been an active participants in the Students Support Teams which are in place in five of the schools.

The increase of health aide positions has provided valuable clerical and first aid resources to the nurses which has allowed them to concentrate on problems which require nursing skills.

An informal assessment of the level of staffing indicates that both the nurses and the school staff feel that there have been real benefits from the increased level of staffing. Given unlimited resources one could expand the staffing, but I believe that this year, for the first time, we are able to say that we have comfortably filled the needs of the schools in terms of the basics of school health, and are beginning to expand into some collaborative efforts with other parts in the school system, particularly health and AIDS education.

Mandated Services

State-mandated services include immunizations, physical exams, scoliosis screening, and vision and hearing screening. We are doing better than in the past in regards to getting all the children immunized and examined. Scoliosis screening is underwayand is due to be completed earlier than usual because the Physical Education teachers who do the initial screening have started earlier in the year.

Vision and hearing screening in the grade schools is at a standstill because the vision and hearing tester retired, and his position has not been filled. We are initiating vision and hearing screening in the high school, through the Teen Health Center, for the first time by more effective use of the Health Department's Audio-visual technician.

CRLS

School Health staffing at the High School is thin. There are 1.3 full time nurses for 2,300 students. With this level of staffing we see 900 sick visits a month, on average.

Material Needs

Last year a survey of the health suites in each of the schools was completed. Many problems were identified and many have been resolved. The school department provided refrigerators for all the schools which needed them and telephone lines in some of the schools. The absence of a direct phone to the outside remains a problem in some of the health suites, as well as remote access to bathroom facilities. There has been a major improvement in general, and we have been the beneficiary of considerable cooperation from the school department.

Another area of improvement has been a change in the ordering of school health supplies from the school department to the hospital storeroom, which is reimbursed by the school department. This allows for efficiencies of scale and a shorter turn-around time for some of the items.

Statistics

Over the summer a series of programs were developed to enable us to track school health services and the incidence of various problems in the school children in Cambridge. Although the programs are written, there remains a vacancy in the position of data entry. We have also devised an encounter form to be used by school nurses and other personnel which record each of the school health encounter. With the encounter forms computerized we will be able to provide a much more accurate picture of school health services in Cambridge and which needs are being addressed.

New Initiatives

Although I feel that this year we have demonstrated tremendous progress in the school health program and have expanded it to many areas which were thinly covered in the past, there remain many areas to work on. These include expanding our collaboration with the school department, particularly the Bureau of People Services, the Parent Information Office (which is responsible for registration and enrollment of children in the schools), with the Teen Health Center which provides School Health Services to the high school, and with the Physical Education and Health Education Department. In addition we will need to work to formalize a close relationship with the Neighborhood Health Centers. We have been fortunate that all of the nurses who are doing school health worked in the Neighborhood Health Centers before and have close personal ties with the health centers. In the future this may not be the case, and we are working with the hospital to establish more formal ties. This will enable us to provide better services to children in schools and to insure that all children in school in Cambridge have a source of ongoing medical care. Finally, we will be working with the school department around the issues of AIDS and AIDS education for the school.

SCHOOL DEPARTMENT
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COORDINATOR OF SPECIAL EDUCATION

July 19, 1988

Dr. Bridget Hanson
Department of Pediatrics
Cambridge Hospital
1493 Cambridge Street
Cambridge, MA 02139

Dear Dr. Hanson:

During the past school year I had the opportunity and pleasure of working with four "school" nurses whom I understand to be under your supervision. I met Joyce Cannon, Ann Hughes, Pat Hughs, and Beatrice Morreo at several elementary schools last Fall as part of the Chapter 766 screening process for kindergarten children. Meetings between teachers, administrators and nurses were scheduled in each school for the purpose of discussing all children particularly those needing early intervention or support services.

Without exception the contributions made at these meetings by the nurses were outstanding. Each was knowledgeable about and effective at discussing pertinent medical information about many of these young children. While respecting families' privacy, the nurses were able to share medical and social data which influenced the school system's responses to certain children in trouble. The participation of these professionals in general was thorough, conscientious, and valuable. I look forward to cooperating with them this Fall.

In fact, I hope somehow to expand their roles in future screening programs. To that end I would like to suggest that you and I meet to discuss several possibilities. I will call your office to determine whether time can be arranged for the latter part of July.

Sincerely,

Marilyn E. Bisbicos

Marilyn E. Bisbicos
Coordinater of Special Education
Bureau of Pupil Services

MEB/mlw

TOTALS	ALL SCHOOLS	1987-1988
Illness		4429
Injury		4483
Referral		304
Consultation - Teacher- MD		305
Health Teaching		✓
Mandated Activities	H f/u	78
	U f/u	42
	S f/u	170
	Records	937
	K. Screening	642
	Immunes	72

DATE 1987-1988 School Year	Illness	Trauma	Referral	Records	Lice	Immunes	PE's	F/U	Consult	Teaching	Support group	51A
Agassiz	205	214	9	40								
Fitz	484	462	49	165	30	54		139	12	✓		1
Fletcher	273	216	30	66	38			38	17	✓		
G&P	288	174	2	35	40	10	3	36	30	✓	16	
Hagg	101	47	1	40	33	3		4				
Harr	808	729	115	80	407	5		98	32	✓	10	4
Kennedy	116	57	28	25	19			4				3
King	441	687	9	80				59				
Long	347	153	9	119	19		1	52	44	✓		2
Maynard	384	143	9		10		7		56	✓		4
Morse	244	177	6	60				48	42	✓		1
Peabody	234	168		40					16	✓		
Tobin	504	470	37	187		4		130	56	✓		
TOTALS	4429	4483	304	937	596	76	11	608	305			15

SCHOOL	87-88		88-89	
	R.N.	AIDE	R.N.	AIDE
AGASSIZ	9 hrs.	3½ hrs.	11 hrs.	5 hrs.
FITZGERALD	10 "	3 "	19 "	9 "
FLETCHER	9 "	3 "	17 "	6 "
GRAHAM PARKS	9 "	3 "	18 "	8 "
HAGGERTY	6 "	0 "	6 "	0 "
HARRINGTON	15 "	4 "	37.5 "	6 "
KENNEDY	6 "	4 "	8 "	6 "
KING	9 "	6½ "	17½ "	20 "
LONGFELLOW	9 "	5½ "	17 "	9 "
MAYNARD	9 "	3½ "	12 "	6 "
MORSE	6 "	8 "	15 "	6½ "
PEABODY	9 "	2½ "	18 "	9 "
TOBIN	10 "	6 "	19 "	12 "

OBJECTIVES FOR SCHOOL HEALTH

STAFFING

- -Develop job description for school health aides
- -Hire and train two school health aides
- -Develop protocol for use of coordinator's beeper
- -Coordinate school health activities with staff of CRLS health clinic

PROGRAMMATIC

- -Immunization
- -Review records of all school children, identify those needing immunization, and admission vaccines as needed
- -Work with school department to develop enrollment procedures which eliminate the admission of unimmunized children

ONGOING HEALTH CARE

- -Review records of all new enterers and 9th graders to ensure that all have had a physical examination
- -Perform school physicals as needed
- -Refer children to appropriate health care, using available community resources (NHC)
- -Follow-up with parents and teachers and identifed health problems in a case management system

INTERVAL HISTORIES

- -Review interval histories on all 4th graders and follow-up on all identified health problems

VISION AND HEARING SCREENING

- -Follow-up on all abnormal screening results
- -Work with Bureau of Pupil Services to develop vision and hearing screening for 9th graders and new enterers for CRLS

SCOLIOSIS SCREENING

- -Follow-up on abnormal results of scoliosis screening

TB SCREENING

- -Administer TB skin tests as part of school physical
- -Work with Health Department personnel to provide ethnically appropriate TB education in the classroom.

FIRST AID

- -Provide first aid to injured students
- -Triage ill students
- -Develop protocols for first aid and triage for use by health aides and school personnel
- -Work with School Department to identify who can serve as first responders for injured or ill students

PSYCHOTROPIC MEDICINES

- -Follow state mandated guidelines for use of psychotropic drugs in school

OBJECTIVES FOR SCHOOL HEALTH CONTINUED

ABUSE AND NEGLECT

- -Work with School Department on cases of abused or neglected students

EDUCATION

- -Serve as resource to parents, school, and community on health issues
- -Work with School Department to develop comprehensive health curriculum
- -Work with School Department to develop education and support programs for increasing presence of AIDS in the community
- -Counsel students on specific health issues

ENVIRONMENT/PHYSICAL PLAN

- -Obtain appropriate facilities for school health activities
- -Work with school staff on issues of safety, supervision, and environmental health

6. S-792

Comm. from City Clerk transmitting a report from the Committee on Health and Hospital relative to the budgetary needs of the hospital in the upcoming budgetary cycle and on the school health program.

In City Council,

December 19, 1988

Placed on file